

## Application Data Sheet

### APPLICATION INFORMATION

Application Number::  
Filing Date:: December 8, 2003  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD Disks:  
Number of Copies of CDs::  
Sequence Submission?::  
Computer Readable Form (CRF)?:: No  
Number of Copies of CRF::  
Title:: A VENTILATION UNIT FOR A MOTOR VEHICLE  
Attorney Docket Number:: 225159  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 5  
Small Entity?:: No  
Latin Name::  
Variety denomination name::  
Petition Included?:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: No

### APPLICANT INFORMATION

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Greg  
Middle Name::  
Family Name:: Rademacher  
Name Suffix::  
City of Residence:: Clarkston  
State or Prov. of Residence:: Michigan  
Country of Residence:: US  
Street of mailing address:: 8820 Bridge Lake Road  
City of mailing address:: Clarkston  
State or Province of mailing address:: Michigan  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 48348

Inventor Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Don  
Middle Name::  
Family Name:: Masterson  
Name Suffix::  
City of Residence:: Auburn Hills  
State or Prov. of Residence:: Michigan  
Country of Residence:: US  
Street of mailing address:: 201 N. Squirrel Road  
#1531  
City of mailing address:: Auburn Hills  
State or Province of mailing address:: Michigan  
Country of mailing address:: US  
Postal or Zip Code of mailing address::

## **CORRESPONDENCE INFORMATION**

Correspondence Customer Number:: 23460  
Phone:: (312) 616-5600  
Fax:: (312) 616-5700  
E-mail Address:: mail@leydig.com

## **REPRESENTATIVE INFORMATION**

Representative Customer Number:: 23460

Representative Designation::      Registration Number::      Representative Name::

## **DOMESTIC PRIORITY INFORMATION**

Application::      Continuity Type::      Parent Application::      Parent Filing Date::

## **FOREIGN APPLICATION INFORMATION**

Country::

Application Number:: Filing Date::

Priority Claimed

### **ASSIGNEE INFORMATION**

Assignee name:: Behr GmbH & Co.

Street of mailing address:: Maserstrabe 3

City of mailing address:: Stuttgart

State or Province of  
mailing address::

Country of mailing  
address:: Bermany

Postal or Zip Code of  
mailing address:: D-70469